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2007 JUL 27 PM 2:17

RICHARD K. WILKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

1 BARRY S. JAMESON
 2 CDCR No. C88511
 3 P.O. Box 8502
 4 Coalinga, CA 93210-8502
 5 No Phone, Fax nor E-mail
 6 Petitioner,
 7 Representing Self and
 8 Layman at Law, Under
 9 Disability of Imprisonment

UNITED STATES DISTRICT COURT
 NORTHERN DISTRICT OF CALIFORNIA

10 BARRY SIMON JAMESON,
 11 Petitioner,
 12 vs.
 13 JAMES A. YATES,
 14 Respondent.

C 07 3160
 CASE NO.

PRISONER'S
 APPLICATION TO PROCEED
 IN FORMA PAUPERIS

SBA

(PR)

16 I, Barry Simon Jameson, declare, under penalty of perjury that I am the
 17 plaintiff in the above entitled case and that the information I offer throughout this application
 18 is true and correct. I offer this application in support of my request to proceed without being
 19 required to prepay the full amount of fees, costs or give security. I state that because of my
 20 poverty I am unable to pay the costs of this action or give security, and that I believe that I am
 21 entitled to relief.

22 In support of this application, I provide the following information:

23 1. Are you presently employed? Yes No XX

24 If your answer is "yes," state both your gross and net salary or wages per month, and give the
 25 name and address of your employer:

26 Gross: Zero/NA Net: Zero/NA

27 Employer: Incarcerated for 24 years with no income at all and no
 28 paying assignment in prison for almost a decade.

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 Been imprisoned for 24 years. Have not had a minimal prison pay assign-
 5 ment since 1999, and last job outside of prison was at Bell Helmets in
 6 the 1970's.

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ___ No X
 10 self employment

11 b. Income from stocks, bonds, Yes ___ No X
 12 or royalties?

13 c. Rent payments? Yes ___ No X

14 d. Pensions, annuities, or Yes ___ No X
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes ___ No X
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 None; not applicable.

22 / / /

23 3. Are you married? Yes ___ No X

24 Spouse's Full Name: None

25 Spouse's Place of Employment: NA

26 Spouse's Monthly Salary, Wages or Income: NA

27 Gross \$ NA Net \$ NA

28 4. a. List amount you contribute to your spouse's support: \$ NA

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).

5 None

6 / / /

7 5. Do you own or are you buying a home? Yes ___ No X

8 Estimated Market Value: \$ NA Amount of Mortgage: \$ NA

9 6. Do you own an automobile? Yes ___ No X

10 Make NA Year NA Model NA

11 Is it financed? Yes NA No NA If so, Total due: \$ None

12 Monthly Payment: \$ None

13 7. Do you have a bank account? Yes ___ No X (Do not include account numbers.)

14 Name(s) and address(es) of bank: None

15 / / /

16 Present balance(s): \$ NA

17 Do you own any cash? Yes ___ No X Amount: \$ 00.00

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes ___ No X

20 / / /

21 8. What are your monthly expenses?

22 Rent: \$ None Utilities: None

23 Food: \$ None Clothing: None

24 Charge Accounts:

25	<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26	<u>None</u>	\$ <u>NA</u>	\$ <u>NA</u>
27	<u>None</u>	\$ <u>NA</u>	\$ <u>NA</u>
28	<u>None</u>	\$ <u>NA</u>	\$ <u>NA</u>

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 None

4 / / /

5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes ___ No X Not a lawsuit; habeas corpus action.

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.

9 Jameson v. Ratelle; USDC SD Cal.; 3:1:1997cv00326 and

10 Jameson v. Ratelle; 9th Cir.; 00-56443.

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15
16 29 June 2007

17 DATE

Barry Simon Jameson

SIGNATURE OF APPLICANT

BARRY SIMON JAMESON
Petitioner, pro se

1 BARRY SIMON JAMESON
 2 CDCR No. C88511
 3 P.O. Box 8502
 4 Coalinga, CA 93210-8502
 5 No Phone, Fax nor E-Mail

Case Number: C 07 3160 SBA (PR)

6 Petitioner,
 7 Representing Self and
 8 Layman at Law, Under
 9 Disability of Imprisonment

10 **CERTIFICATE OF FUNDS**

11 **IN**

12 **PRISONER'S ACCOUNT**

13 I certify that attached hereto is a true and correct copy of the prisoner's trust account
 14 statement showing transactions of Barry Simon Jameson for the last six months
 15 at Pleasant Valley State Prison ^[prisoner name] where (s)he is confined.
 16 ^[name of institution]

17 I further certify that the average deposits each month to this prisoner's account for the
 18 most recent 6-month period were \$ 00.00 and the average balance in the prisoner's
 19 account each month for the most recent 6-month period was \$ 00.00, and most of
 20 the time in the negative.

21 Dated: _____

22 _____
 23 [Authorized officer of the institution]
 24
 25
 26
 27
 28

REPORT ID: 163020

REPORT DATE: 07/12/07
PAGE NO: 1CALIFORNIA DEPARTMENT OF CORRECTIONS
PLEASANT VALLEY SENTIC PRISON
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN 12, 2007 THRU JUL 12, 2007

ACCOUNT NUMBER: C06511
ACCOUNT NAME: JAMESON, DANEY
PRIVILEGE GROUP: A
DEBIT/CREDIT NUMBER: 07021300000119L
ACCOUNT TYPE: 1

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT:

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
02/06/2007	H104	DAMAGES HOLD	602482 30	15.00

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	15.00	0.00

CURRENT
AVAILABLE
BALANCE

15.00

THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST:July 12, 2007
CALIFORNIA DEPARTMENT OF CORRECTIONSBY: *Sabel S. Alund*
TRUST OFFICE
Account Clerk II

07 July 2007

Inmate Trust Office:

Please fill out (date and sign) the enclosed forms. Please send one to the Court in the envelope provided herein and return one to me for my records.

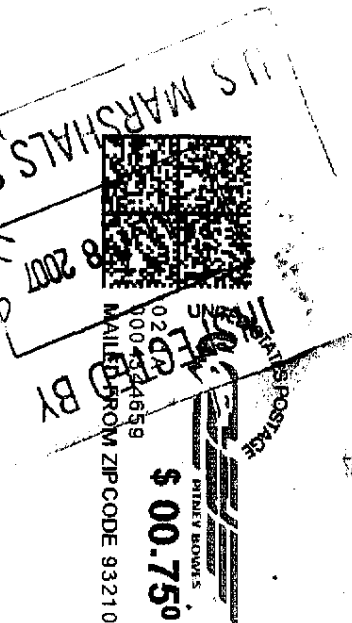
A handwritten signature in cursive script that reads "Barry Jameson".

BARRY JAMESON C88511
B2-119L
PVSP

BARRY JAMESON
 CDCR # C88511 (BA-1194)
 P.O. Box 8502
 COALINGA, CA
 93210-8502

LEGAC
MAIL

CLERK OF THE U.S.
DISTRICT COURT
NORTHERN DISTRICT OF
CALIFORNIA - OAKLAND
1301 CLAY STREET, #400
OAKLAND, CA



UNCLASSIFIED

9 Dec 1922